

2015 Abandoned Cart Prevention Plan

Code Enforcement Division 200 East Santa Clara Street, 4th Floor San Jose, CA 95113 Phone: 535-7770 Fax: 292-6924

Please complete the following. Attach additional sheets if necessary:

Ouestions? Call Inspector Greg Pageock at (408) 535-7861

8	OFFICIAL USE ONLY	
Check Number:	Check Amount: \$	
Account Number:	Initial:	_

		tor Greg Peacock at	,	Account 1		Initial:	_
l.	General Inforr	mation (You may	also find an additional A	Abandon	ed Cart Prev	ention Plan form at	
ntt		n.gov/DocumentCent	ter/View/33849) (Se	e also C	alifornia B 8	& P Code Section 22435)	
	Name of Business						
-	None of Duciness an						
	Name of Business or Corporate Owner						
ŀ	Business Address						
	Dusiness radiess						
-	Name of On-Site Conta	unt .					ii .
	Ivallie of Olf-Site Colita						
-	D1 N 1 C				*		
	Phone Number for	***					
	Contact by the Cit	ty.					
•	Caret Investment						
. Γ	Cart Inventor	y	[]] () () ()			T. 7.5	
	[] 0-25 Carts		[] 26 or more Carts	Appr	oximately I	How Many Carts?	
	If you have checked		TC 1 1 1 1 1 1		1	1	
		of this form (General				olete the entire form and	
	Information), sign, d		return the completed form with a check payable to the City of San				
	letter.	vithin 30 days from the date of the Jose in the amount of \$490.00.					
	Community O					А	
F	Please indicate how	v you will inform yo	our customers that remo	oving car	ts or being	in possession of a cart	
			vritten permission is a v				
		[] Signs posted in	[] Flyers given to Cust	omers at		lease Describe (Attach addition	onal
S		prominent places near door or parking lot exit	Register		sheets if nec	essary)	
<u></u>		door or parking for exit	.5			4	
	Cart Signage						
E	very Cart owned or p	provided by any Owne	er must have a sign permai	nently affi	xed to the Ca	ert that contains all of the	
fo	llowing information:	:					
1)		business establishment,					
2)			wner of the business established				
3)	means for removal.	otification to the public that the removal or possession of the Cart from the Premises is a violation of State Law and the legal					
	means for removal.						
				ply with th	e above Ordin	ance standards: If you are usin	ıg
sti	ckers as signage, attacl	h a sample sticker or a co	opy of the sticker or sign.				

5. Loss Prevention Measures

[] Wheel Locks, Electronic, or other	ion incasures in use	at this store.	
disabling devices	[] Courtesy clerks to accompany customer	[] Security personnel	[] Security deposit for use of Cart
Other: Please Describe			
	5		
6. Mandatory Retrieval	1 6	T 1.T1 0.4 T	
Each Prevention Plan requires a	plan for cart retriev	al within 24 hours up	oon notification by the City of
San Jose. Please describe your ca			
Provide the Name and phone nur	nber of who the City	y of San Jose will con	tact for Cart Retrieval.
. Employee Training			
lease describe method of employee			
Staff Meetings [] Posting in Emp	ployee Areas [] Empl	loyee Orientation [] (Other (describe below)
o the best of my knowledge t	he above informat	tion is true and acci	ırate.
o the best of my knowledge t	he above informat	tion is true and acci	ırate.
o the best of my knowledge t	the above informat	tion is true and acci	ırate.
To the best of my knowledge t	he above informat	tion is true and acci	ırate.
		tion is true and acci	ırate.
To the best of my knowledge to the best of the bes	Trint Name	tion is true and acc	Date
Signature (Store Representative)	Print Name	Title	
Signature (Store Representative) Return completed form with fee to	Print Name	Title Remember to:	Date
Signature (Store Representative) Return completed form with fee to The City of San Jose	Print Name	Title Remember to: [] Check that all por	Date tions of the form are completed
Return completed form with fee to The City of San Jose Abandoned Shopping Cart	Print Name D: Program	Title Remember to: [] Check that all por [] Attach additional	Date tions of the form are completed pages if necessary
Return completed form with fee to The City of San Jose Abandoned Shopping Cart 200 East Santa Clara Street	Print Name D: Program	Title Remember to: [] Check that all por [] Attach additional [] Include a check p	Date tions of the form are completed pages if necessary ayable to the City of San Jose
Return completed form with fee to The City of San Jose Abandoned Shopping Cart	Print Name D: Program	Title Remember to: [] Check that all por [] Attach additional	Date tions of the form are completed pages if necessary ayable to the City of San Jose